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(Requestor's Name)

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(City/State/Zip/Phone #)

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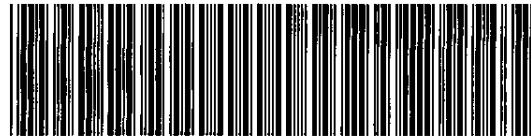
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

J. Shivers OCT 11 2010

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**COVER LETTER**

Department of State  
New Filing Section  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

**SUBJECT:** NEO CORP.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00 Filing Fee  
☒ \$78.75 Filing Fee  
& Certificate of Status

☐ \$78.75 Filing Fee  
& Certified Copy  
☐ \$87.50 Filing Fee,  
Certified Copy  
& Certificate of  
Status  
**ADDITIONAL COPY REQUIRED**

**FROM:** El Doral Business Solutions, Corp.

Name (Printed or typed)

9737 NW 41 ST. No. 340

Address

Miami, Fl. 33178

City, State & Zip

305-508-0244

Daytime Telephone number

linciarte@eldbs.com

E-mail address: (to be used for future annual report notification)

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**NOTE: Please provide the original and one copy of the articles.**

**ARTICLES OF INCORPORATION OF  
NEO CORP.**

The undersigned, for the purpose of forming a corporation under the Florida Business Corporations Act do hereby adopt the following Articles of Incorporation:

**ARTICLE I  
NAME**

The name of the corporation is: **NEO CORP.**

**ARTICLE II  
OFFICES**

The principal place of business and mailing address of this corporation shall be:

1327 PRESIDIO DR.  
WESTON, FL. 33327

The corporation may have such other offices, either within or without the State of Florida, as the board of directors may designate, or as the business corporation may require from time to time.

**ARTICLE III  
PURPOSE**

To engage in general services, including but not limited to:

1. - Export, Import, and Distribution of All Construction Material and Products.
2. - To transact any other lawful business for which corporations may be incorporated under the Florida Business Corporation Act.

**ARTICLE IV  
CAPITALIZATION AND SHARES**

The number of shares which the corporation is authorized to issue is 40000 common shares at \$ 1.00 par value.

Prepared By:  
El Doral Business Solutions, Corp.  
9737 NW 41 St. # 340  
El Doral-Fl. 33178  
(305) 508-0244

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STATE  
ALLAHASSEE, FLORIDA

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**ARTICLE V  
REGISTERED AGENT**

The name and address of the initial registered agent shall be:

**LUISA INCIARTE  
9737 NW 41 ST. No. 340  
El Doral, FL. 33178**

**ARTICLE VI  
DIRECTORS**

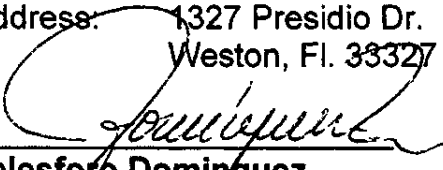
This corporation initially has one person, who is going to serve in more than one capacity. The number of directors may be increased from time to time by an amendment of the bylaws of the corporation in the manner provided by law.

The name and address of the initial Board of Directors is:

Name: Telesforo Dominguez

Title: President-Director-Treasurer-Secretary

Address: 1327 Presidio Dr.  
Weston, Fl. 33327

  
\_\_\_\_\_  
**Telesforo Dominguez**  
PDS

**ARTICLE VII  
INCORPORATES**

The name and address of the person signing these Articles of are

TELESFORO DOMINGUEZ  
PDS

1327 Presidio Dr.  
Weston Fl. 33327

The undersigned have executed these Articles of Incorporation this

1st day of October 2010

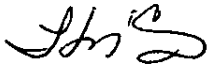
  
\_\_\_\_\_  
Signature PDS

**CERTIFICATE OF DESIGNATION  
REGISTERED AGENT/ REGISTERED OFFICE**

Pursuant to the provisions of section 607.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statements in designating the registered office / registered agent, in the State of Florida.

1. - The name of the corporation is **NEO CORP.**
2. - The name and address of the registered agent and office is:

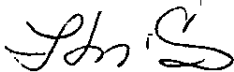
**LUISA INCIARTE  
9737 NW 41 ST. No. 340  
EL DORAL, FL. 33178**



\_\_\_\_\_  
Signature, LI

Date: 10/01/2010

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in the certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as Registered Agent.



\_\_\_\_\_  
Signature, LI

Date: 10/01/2010

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